

NAVAJO COUNTY AGENDA ITEM REQUEST FORM

Meeting Date:	Time Needed:
Requesting Department:	Presenter(s) Name:
Motion before the Board:	
Recommendation: (who, what, where, when, how, etc.)	
Background: (why should it be done, what will happen if not approved, etc. include resolution)	
Fiscal Impact: (what will it cost, where funds will come from, is it budgeted, etc.)	
Reviewed and approved by:	<div style="display: flex; justify-content: space-around;"> <div>County Manager <input type="checkbox"/></div> <div>County Attorney <input type="checkbox"/></div> <div>Human Resources <input type="checkbox"/></div> <div>Finance <input type="checkbox"/></div> <div>IT <input type="checkbox"/></div> </div>
<div style="text-align: center;">Board Action Taken</div> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;">Approved <input type="checkbox"/></div> <div style="text-align: center;">Denied <input type="checkbox"/></div> <div style="text-align: center;">No Action <input type="checkbox"/></div> <div style="text-align: center;">Continued <input type="checkbox"/></div> <div style="text-align: center;">Continued to: _____</div> </div>	
Approved with changes as follows: _____	
Clerk's Notes	
Date:	Initial:

REMINDER: Email this coversheet and all backup documentation to **BOS.Clerk** by **Noon the Tuesday before the BOS meeting.**